Message Text

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ACTION SCSE-00

INFO OCT-01 EUR-12 ISO-00 PASS-00 SSO-00 /013 W

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FM AMEMBASSY MADRID

TO SECSTATE WASHDC IMMEDIATE 1662

UNCLAS MADRID 2832

OBIT/SCS AND EUR/IB

E.O. 11652: N/A

TAGS: CDES, SP (GINARD, ANGEL) SUBJ: OBIT ANGEL GINARD

FOR MRS. SOCORRO GINARD

BOX 292

UTUADO, PUERTO RICO 00761

1. WE DEEPLY REGRET TO HAVE TO INFORM YOU THAT THE DIRECTOR OF HOSPITAL PSIQUIATRICO PROVINCIAL AT EL PALMAR, MURCIA, SPAIN REPORTED TO US THAT YOUR HUSBAND, ANGEL GINARD, BORN JUNE 1, 1909 AT PUERTO RICO, BEARER OF U.S. PASSPORT B-1095948, ISSUED AT PUERTO RICO ON JUNE 9, 1971, DIED APR 24, 1975 AT SAID HOSPITAL FROM CARDIO-RESPIRATORY INSUFFICIENCY.

2. AS LOCAL AUTHORITIES REQUIRE DISPOSITION REMAINS WITHIN 48 HOURS TIME OF DEATH, FOLLOWING ESTIMATES ARE PROVIDED FOR YOUR INFORMATION AND PLANNING.
ESTIMATED COST BURIAL MURCIA, SPAIN DOLLARS 500;
PREPARATION AND RETURN PUERTO RICO BY AIR DOLLARS 2,500;
COST OF SURFACE EXCEEDS AIR. CREMATION AVAILABLE BUT REQUIRES STATEMENT SIGNED BY DECEASED IN LIFE INDICATING HIS WISH, OR STATEMENT CLOSEST NEXT OF KIN INDICATING DECEASED STATED IN LIFE WISH TO BE CREMATED. AFFIDAVIT PREPARED BY NEXT OF KIN, WITH TRANSLATION IN SPANISH, SHOULD BE LEGALIZED BY NOTARY PUBLIC IN U.S. AND CERTIFIED BY NEAREST SPANISH CONSULATE. ESSENTIAL ABOVE DESCRIBED UNCLASSIFIED

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AFFIDAVIT BE IMMEDIATELY MAILED TO CONSULAR SECTION,

AMERICAN EMBASSY, MADRID, SPAIN. CREMATION AND SHIPMENT ASHES DOLLARS 500.

- 3. FUNDS SHOULD BE SENT AS SOON AS POSSIBLE TO OFFICE OF SPECIAL CONSULAR SERVICES, DEPARTMENT OF STATE, WASHDC, IF SHIPMENT TO U.S. DESIRED FAMILY REQUESTED FURNISH NAME AND ADDRESS FUNERAL HOME IN U.S. WHERE SHIPMENT IS TO BE CONSIGNED. ALSO INDICATE YOUR HUSBAND RELIGIOUS FAITH.
- 4. UPON RECEIPT REQUIRED FUNDS, YOUR INSTRUCTION WILL BE CARRIED OUT AS PROMPTLY AS CIRCUMSTANCES PERMIT. ESTIMATE MINIMUM THREE DAYS REQUIRED FOLLOWING RECEIPT OF FUNDS TO COMPLETE LOCAL ARRANGEMENTS. AS SOON AS AVAILABLE, SHIPMENT DATA WILL BE TELEGRAPHED TO YOU OR TO THE FUNERAL HOME IN U.S. YOU SELECT. UPON COMPLETION ALL FORMALITIES, COPY OF REPORT OF DEATH TO BE PREPARED BY EMBASSY WILL BE SENT TO YOU.
- 5. YOUR HUSBAND'S PERSONAL EFFECTS ARE IN CUSTODY OF HOSPITAL OFFICIALS.
- 6. PLEASE ACCEPT OUR SYMPATHY IN YOUR BEREAVEMENT. STABLER

NOTE BY OC/T: MADRID 2832 PASSED ABOVE ADDRESSEE.

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To: STATE

Type: TE

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